

**FPT ADM Committee on Medical Assistance in Dying (MAID)
September 18, 2024 / 1:00-2:00 PM EDT**

Key Takeaways

Participants: Jocelyne Voisin, (HC) (co-chair), [REDACTED] (BC), [REDACTED] (AB), [REDACTED] (SK), [REDACTED] (MB), [REDACTED] (ON), [REDACTED] (QC), [REDACTED] (QC), [REDACTED] (QC), [REDACTED] (NB), [REDACTED] (NS), [REDACTED] (NL), [REDACTED] (PE), [REDACTED] (NT), [REDACTED] (YT), [REDACTED] (NU)

Guests: [REDACTED] ([REDACTED] CAMAP) and [REDACTED] ([REDACTED] CAMAP)

Regrets: [REDACTED] (MB), [REDACTED] (ON), [REDACTED] (NL)

Secretariat: Sharon Harper, Peggy Ainslie, Julie Robert, Melissa Lebel (fpt.maid-amm@hc-sc.gc.ca)

Supporting documents: [REDACTED]
[REDACTED]

1. Activities to Support MAID Implementation - CAMAP Presentation

- [REDACTED] from CAMAP presented achievements after one year of the launch of the MAID Curriculum, including 1,885 completion certificates issued across its 7 modules, initiation of its annual review process, and a new report on elements of MAID program coordination.
- Questions and comments included: the importance of CAMAP's in-person facilitated sessions being reflective of regional approaches to MAID delivery; whether CAMAP is able to meet demand for in-person sessions and wait lists.
- Members were invited to provide feedback directly to CAMAP to further improve the modules and delivery methods.

Actions:

- Secretariat to invite CAMAP back to the FPT ADM Committee periodically to update on its work
- Secretariat circulated CAMAP's final report of its May 2024 knowledge exchange workshop, "Elements of a coordinated MAID Program" on Sept 19, 2024.

2. Strategic Direction for FPT Collaboration on MAID – For decision

- Discussion took place on some of the key pillars of work, including the need for stronger communications, particularly federal communications, to dispel mis- and dis-information about MAID.
- Members agreed to move the FPT governance and workplan materials forward for consideration by FPT Deputy Ministers at their October 22 meeting.

Actions:

- Secretariat to develop deck presentation and common briefing note for this item at the FPT Deputy Ministers meeting on October 22 meeting. This will be circulated to members as drafts for their feedback.

Roundtable:

- Issues raised included:
 - Health Canada noted Quebec’s plan to move forward with advance requests for MAID for Quebec residents, although this is currently not permitted under the Criminal Code. Members were invited to share perspectives on this issue.
 - SK noted that it is undertaking strategic planning including future projections of MAID and flagged an interest in learning about similar activities by other jurisdictions.
 - NS College of Physicians has recently updated language on the “effective referral and transfer of care” in response to negative reaction from some conscientious objectors in the profession who threatened to leave the practice. NS asked whether other jurisdictions had similar feedback/reactions.

Next steps:

Next FPT ADM Committee on MAID to take place on November 29 (amended to Nov 22), with a focus on MAID data and the federal Annual Report on 2023 data.

Draft – for consideration
September 12, 2024

APPENDIX D

FPT MAID Community of Practice

Objective

A virtual network of FPT health officials with responsibilities for MAID as well as others as designated by FPT officials (i.e., health authority officials working on MAID; MAID care coordination leaders) to:

- Promote collaboration and communication
- Share knowledge / support capacity building
- Collect views/feedback on key issues

Membership

- Members of the former “FPT Working Group on MAID” will be invited to take part in the Community of Practice (CoP).
- Additional members can be invited by the Health Canada secretariat, or recommended or named by a member of the FPT MAID ADM Committee or its Working Groups. This ensures that members have a genuine interest or expertise in the topic for MAID implementation.
- Members can request to be removed from the CoP.
- Membership list could be reviewed annually or as needed.

How it works

- The Community of Practice will serve as a virtual forum. Members share information in writing, by email, to all members of the CoP, for information or for input.
- Information does not need to wait for a meeting to be shared broadly.
- Time-sensitive questions can be put to other members for insights or assistance, when needed. CoP members are not required to respond to questions.
- Participation can be active and/or passive.
- As desired by members, special webinars and/or technical briefings with third party experts/organizations could be organized as part of the CoP.
- The Health Canada Secretariat would moderate to ensure discussions stay on topic and maintain a respectful environment. This helps in maintaining the quality and focus of the community.

Guiding principles

- Participation may be done in either/both official language of choice.
- Respectfulness of diversity of views.
- No sensitive/personal information being shared.
- Meetings are only planned if there is CoP interest in a learning event or discussion on a particular topic.

Ébauche – aux fins d'examen
Le 12 septembre 2024

ANNEXE D

Communauté de pratique FPT de l'AMM

Objectif

Un réseau virtuel de représentants de la santé FPT ayant des responsabilités dans le cadre de l'AMM ainsi que d'autres personnes désignées par les représentants FPT (par exemple, les représentants des autorités sanitaires travaillant sur l'AMM; les dirigeants de la coordination des soins dans le cadre de l'AMM) afin de :

- promouvoir la collaboration et la communication;
- échanger des connaissances/soutenir le renforcement des capacités;
- recueillir les avis/la rétroaction sur les questions clés.

Membres

- les membres de l'ancien « Groupe de travail FPT sur l'AMM » seront invités à participer à la communauté de pratique;
- les membres supplémentaires peuvent être invités par le secrétariat de Santé Canada, ou recommandés ou nommés par un membre du comité FPT des SMA sur l'AMM ou de ses Groupes de travail. Cela permet de s'assurer que les membres ont un véritable intérêt ou une expertise dans le domaine de la mise en œuvre de l'AMM;
- les membres peuvent demander à être retirés de la communauté de pratique;
- la liste des membres pourrait être révisée chaque année ou selon les besoins.

Comment cela fonctionne-t-il?

- la communauté de pratique servira de forum virtuel. Les membres échangent des informations par écrit, par courrier électronique, à tous les membres de la communauté de pratique, à titre d'information ou de contribution;
- il n'est pas nécessaire d'attendre une réunion pour que l'information soit largement distribuée;
- les questions urgentes peuvent être soumises à d'autres membres pour obtenir leur avis ou leur aide, le cas échéant. Les membres de la communauté de pratique ne sont pas tenus de répondre aux questions;
- la participation peut être active et/ou passive;
- si les membres le souhaitent, des webinaires spéciaux et/ou des séances d'information technique avec des experts/organisations tiers pourraient être organisés dans le cadre de la communauté de pratique;
- le secrétariat au Santé Canada assurera la modération pour veiller à ce que les discussions restent axées sur le sujet et à ce qu'elles se déroulent dans un environnement respectueux. Cela permet de maintenir la qualité et l'orientation de la communauté.

Principes directeurs

- la participation peut se faire dans l'une ou l'autre ou les deux langues officielles, au choix;
- le respect de la diversité des points de vue est assuré;
- aucune information sensible/personnelle n'est transmise;
- les réunions ne sont planifiées que si la communauté de pratique est intéressée par un événement d'apprentissage ou une discussion sur un sujet particulier.

Katz, Sasha (HC/SC)

From: Lebel, Melissa (HC/SC)
Sent: 2024-03-18 7:44 AM
To: Christidis, Tanya (HC/SC); Davids, Heather (HC/SC); Garnett, Jocelyn (HC/SC); Gillies, Ian A (HC/SC); Hewetson, Stephanie (HC/SC); Kusch, Karen (HC/SC); Lafreniere, Sharlene (HC/SC); Lemaire, Jacquie (HC/SC); Martin, Richard (HC/SC); Mohninger, Blaine (HC/SC); Nancarrow, Tanya (HC/SC); Rao, Spriha (HC/SC); Stefanik, Jessica (HC/SC); Tycholiz, Jamie (HC/SC)
Subject: NS 'effective referral' policy change may risk the province losing dozens of physicians

[N.S. at risk of losing dozens of physicians over potential policy | CTV News](#)

- Effective referral (effective transfer of care) policy causing concerns among some practitioners who have conscientious objections to certain health care services, such as MAID, abortion.
- 24 NS doctors have signed a letter opposing this policy change and are threatening to retire/leave practice.
- NS Physician Association supports the policy change citing patient right to autonomy to access services.
- Only other province with this policy is ON. Other provinces have gotten around this by, for ex. in Alberta, having physicians send patients seeking MAID to their EOL/MAID coordination service, who then will handle the transfer of care of the patient.
- The draft Professional Standard regarding Conscientious Objection is currently in the consultation process. Once feedback is gathered, it will be brought to the Professional Standards Committee for review and consideration